

Initial Information Data Sheet

Inventor Information

Inventor One Given Name:: Michael P.
Family Name:: Gallagher
Postal Address Line One:: 447 Circle Drive
City:: Greenville
State or Province:: OH
Postal or Zip Code:: 45331
Citizenship Country:: US

Inventor Two Given Name:: Robert J.
Family Name:: Henshaw
Postal Address Line One:: 28 Pecan Trace
City:: Newnan
State or Province:: GA
Postal or Zip Code:: 30265
Citizenship Country:: US

Correspondence Information

Customer No.:: 29673
Name Line One:: Stevens & Showalter LLP
Address Line One:: 7019 Corporate Way
City:: Dayton
State or Province:: OH
Postal or Zip Code:: 45459-4238
Telephone:: (937) 438-6848
Fax:: (937) 438-2124
Electronic Mail:: showalter@speakeeasy.net

Application Information

Title Line One:: OPERATOR SUPPORT PAD FOR A VEHICLE
Total Drawing Sheets:: 4
Formal Drawings?:: No
Application Type:: Utility
Docket Number:: CRN 319 PA

Representative Information

Customer No.:: 29673
Registration Number One:: 28,046
Registration Number Two:: 33,579
Registration Number Three:: 33,348
Registration Number Four:: 40,832